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**** CONTINUING DATA ******* No

**** FOREIGN APPLICATIONS ******* Yes
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 14	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met				
Verified and Acknowledged <input checked="" type="checkbox"/> Allowance	Examiner's Signature <i>[Signature]</i>	Initials <i>FT</i>		

ADDRESS
4372

TITLE
Memory device, memory access limiting system, and memory access method

FILING FEE RECEIVED 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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